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## \*BIBDATASHEET\*

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/577,304 05/24/2000 PAT 6,759,226

and is a CIP of 09/350,309 07/09/1999 PAT 6,348,314

and is a CIP of 07/756,386 09/09/1991 PAT D,337,472 \*

and is a CIP of 08/381,212 01/31/1995 PAT 5,608,651 \*

and is a CIP of 08/823,516 03/24/1997 PAT 5,994,069

and is a CIP of 08/759,038 12/02/1996 PAT 6,090,543 \*

and is a CIP of 08/682,853 07/12/1996 PAT 6,001,567

and is a CIP of 08/599,491 01/24/1996 PAT 5,846,717

and is a CIP of 09/381,212 02/08/2000

and is a CIP of 09/758,282 01/11/2001 PAT 6,635,463

(\*)Data provided by applicant is not consistent with PTO records.

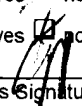
## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

UNITED STATES OF AMERICA PCT/US97/01072 01/21/1997

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature  Initials	STATE OR COUNTRY WI	SHEETS DRAWING 145	TOTAL CLAIMS 49	INDEPENDENT CLAIMS 3
ADDRESS 23535 MEDLEN & CARROLL, LLP 101 HOWARD STREET SUITE 350 SAN FRANCISCO , CA 94105					
TITLE Detection of RNA					
FILING FEE  RECEIVED 681	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		